

## Land Use Plan Map Amendment Application Submittal Checklist

Applicants are strongly encouraged to have an information meeting with surrounding property owners regarding their request before the Planning and Zoning Commission meeting.

- ☐ Sections A through E of the application form have been completed with applicable information.
- ☐ Applicant has had a pre-application conference with Planning and Development Department staff in the past three (3) months.
- ☐ A rationale for the requested land use plan amendment including any support for the amendment found in the goals, objectives and policies of the *Land Use Plan for the High Point Planning Area* and applicable small area and corridor plans is attached to the application.
- ☐ A map of the requested land use plan map amendment site has been provided.  
(The map shall include the area being considered along with current and proposed land use designations)
- ☐ Application fee. (*See page 2 of application - make checks payable to City of High Point*)
- ☐ Signatures of the Applicant and **ALL** Property Owner(s)  
(**NOTE:** All current property owners of record, or their duly authorized agents, must sign application. Authorized agents must include executed power-of-attorney or other proof of authority.)
- ☐ Conceptual site plan, if applicable(*optional*).

### CITY OF HIGH POINT NORTH CAROLINA

Planning & Development Department  
P.O. Box 230  
High Point, NC 27261-0230

(336) 883-3328

[www.high-point.net/plan](http://www.high-point.net/plan)



*"Shaping  
a more livable  
High Point"*

PLANNING AND DEVELOPMENT DEPARTMENT  
PLANNING SERVICES DIVISION  
City of High Point  
North Carolina

Staff Use Only  
Filing Date: \_\_\_\_\_  
Case No.: \_\_\_\_\_  
Payment: \_\_\_\_\_  
Approval Date: \_\_\_\_\_

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Land Use Plan Map Amendment Application

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**A. APPLICANT/OWNER REPRESENTATIVE INFORMATION**

1. Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number (w) \_\_\_\_\_ (fax) \_\_\_\_\_ (e-mail) \_\_\_\_\_

2. Property Owner (if different from applicant): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number (w) \_\_\_\_\_ (fax) \_\_\_\_\_ (e-mail) \_\_\_\_\_

☐ If there are additional property owners, check here and attach their names, addresses and telephone numbers.

3. Who will represent this request, if different from applicant?

Representative: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number (w) \_\_\_\_\_ (fax) \_\_\_\_\_ (e-mail) \_\_\_\_\_

**B. EXISTING AND PROPOSED LAND USE**

1. EXISTING LAND USE DESIGNATION(S): \_\_\_\_\_

2. PROPOSED LAND USE DESIGNATION(S) AND REASON(S) FOR CHANGE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. HOW DOES THE PROPOSED LAND USE DESIGNATION(S) MEET THE POLICIES, GOALS AND OBJECTIVES OF THE LAND USE PLAN AND APPLICABLE SMALL AREA AND CORRIDOR PLANS? (Attach additional sheets if necessary): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. SITE INFORMATION**

1. Approximate geographic location (proximity to nearby streets or large surface features) of land use plan map amendment requested (Include map showing area for proposed land use change):  
  
\_\_\_\_\_  
  
\_\_\_\_\_

2. Approximate acreage of land use plan map amendment site: \_\_\_\_\_

3. Current use(s) of site: \_\_\_\_\_

**D. SUPPLEMENTAL INFORMATION**

1. The City of High Point does not produce a verbatim transcript of the Planning & Zoning Commission and City Council hearing proceedings. If a verbatim transcript is required, the applicant or party requesting said transcript shall be responsible for arranging, producing and payment of all expenses for the production of said transcript. The City of High Point shall in no manner be responsible for providing a verbatim transcript of public hearings. Signing this application indicates the applicant's understanding and acceptance of this policy.
2. The filing fee is \$50.00
3. Application Withdrawal:
  - a) This application may only be withdrawn by written request from the applicant or property owner. If such request is received prior to submission of the Planning & Zoning Commission public hearing notice to the newspaper, filing fees may be refunded.
  - b) After submission of public hearing notice to the newspaper, an application may only be withdrawn by action of the Planning & Zoning Commission or City Council at the public hearing. Application fees will not be refunded.

All of the items required by this application must be turned in to the Planning and Development Department, FULLY COMPLETED, by 5:00 p.m. of the prescribed deadline. Incomplete applications will not be accepted. Applications submitted after the deadline will be held until the next deadline for processing.

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**E. SIGNATURES**

When the applicant is someone other than the current property owner, the signatures of both the current property owner and the applicant shall be provided unless a power of attorney authorization is in effect. If power of attorney is in effect, a properly executed copy is required to be submitted with this application.

**Signature of Property Owner(s)**

I/We the undersigned, do hereby certify that all information given above is true, complete and accurate to the best of my/our knowledge, and do hereby request the High Point City Council to take action as sought by this application.

- |    |                             |                            |        |
|----|-----------------------------|----------------------------|--------|
| 1) | _____                       | _____                      | _____  |
|    | (Owner Print Name)          | (Owner Signature)          | (Date) |
| 2) | _____                       | _____                      | _____  |
|    | (Owner Print Name)          | (Owner Signature)          | (Date) |
| 3) | _____                       | _____                      | _____  |
|    | (Owner Print Name)          | (Owner Signature)          | (Date) |
| 4) | _____                       | _____                      | _____  |
|    | (Applicant Print Name)      | (Applicant Signature)      | (Date) |
| 5) | _____                       | _____                      | _____  |
|    | (Representative Print Name) | (Representative Signature) | (Date) |

**Note:** If there are additional property owners, applicants or representatives, please attach an additional signature sheet with their names and signatures.

Corporations, Limited Liability Corporations, Partnerships or other similar entities please include notarized Official Corporate Certification authorizing representative to sign on behalf of the corporation.

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OFFICIAL USE ONLY – APPLICANT DO NOT WRITE BELOW THIS LINE.

Received By: \_\_\_\_\_

(Staff Signature) (Date)